## DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH

CHILD CARE FACILITY								
W. Sale	×	Damin	INSI	PECTION REPORT				
	ASON	GRADE	Inspection Date:	ESTABLISHMENT NAME:				
Regular	V	The	0/29/2018	ABC CHILDREN'S CENT	ER			
Follow-Up		20	Time In/Out:	OWNER/OPERATOR:	2/608100			
Complaint Investigation		RATING	10:30AN 1:00 PM	TAMONDONG, LEONARDO/S LOCATION: 126 FATIMA ST. Esta		ที่ อากห dishment Type:		
Other:	ulon	INATING	Sanitary Permit No.:			/ NURSERY		
Ounor.		B	20000-180000	PERMIT STATUS:Valid		nporary _	Expired	
No. of Chi	ildren: 27	Male 18	Female 45 Total Child Care License: No.: 170159 / /\		7			
				y in the operations and facilities which n				
inspection	n or soone	r as the Dep	artment indicates. Non	-compliance may result in downgrading	or pen	mit suspen:	sion. To appeal	
a written request for hearing must be submitted before the indicated correction date.								
ITEM*			REM	ARKS		DEMERIT	CORRECT BY	
	A REC	TULAR IN	ISPECTION WAS CO	UDICTED.			C CTICOLOGICA	
	PREVIOUS INSPECTION CONDUCTED ON 3/21/18 (8, A)							
	Por wither that arrived their participant coop area (1) 7 (1)							
	PREVIOUS VIOLATIONS HAVE BEEN CORRECTED (#17, #21)							
	THE FOLOWING VIOLATIONS WERE OBSERVED:							
					= =			
14	DACE	DAADA	IAL PART TAL DI	SPEDAIR CTILING NO.	0.4-	1 2	7/24/2018	
1-1								
	OBSERVED IN RM4 BATHROOM. PAINT PEELING THROUGHOUT						HST LETTER	
	ESTABLISHMENT.							
	ALL WALLS AND CEILINGTS SHALL BE CLEAN AND KEPT IN GOOD							
	REPAIR TO PREVENT PHYSICAL HEAITH HAZARDS							
			701 11131071				1	
٠,0							-11	
18	NO MESH SCREENS PROVIDED FOR EXHAUST FANS IN ALL BATHRIDMS 2 7/29/20							
	ALL VENTILATORS AND DUTDOOR OPENINGS SHALL BE EQUIPPED							
	MITH APPROPRIATE SCREENING TO PREVENT PEST ENTRY							
23	FIRE RA	L= (04)	TAILIED III DAIL	PA-10- Duant - 0-11	A. 11	la la	7/9/2018	
-			TAINER IN FM T	BATHROOM UNABLE TO REM	IAIN	6	1/9/2018	
1177	CLOSED.							
	ALL GARBAGE CONTAINERS SHALL AE COVERED WITH TIGHT-FITTING							
	LIDS TO PREVENT HEALTH HAZARDS AND HARBORAGE OF RESTS							
I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.								
*Note: When any of the following items are Received By (Name & Title):								
cited above, they shall be corrected within EUNICE R PASCUAL EXPONSITION								
10 days of this inspection: (2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).								
	(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40). J. GARCIA EPHOI (TAKASE EPHOI							

Rev: 08/2/05 DEH-06

## DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH CHILD CARE FACILITY **INSPECTION REPORT** REASON GRADE Inspection Date: ESTABLISHMENT NAME: ABC CHILDREN'S CENTER OWNER/OPERATOR: V12012018 Regular Follow-Up Time In/Out: 20 TAMO NDONG, LEONARDO/ SABINA LOCATION: 126 FATIMA ST Establishment Type: Complaint 10:30AM 1=00PM RATING investigation Sanitary Permit No.: LIGUAN TERRACE DEDESO CLL/ NURSERY Other: -20000-18 0000 PERMIT STATUS: Valid \_ **Expired** \_Temporary . No. of Children: 27 Male & Female 45 Total Child Care License: No.: 1201591 / Valid / / Provisional / / Expired The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date. ITEM\* **REMARKS** DEMERIT CORRECT BY REFRIGERATOR AND MICROWAVE IN RM3 NOT KEPT NEAT 24 7/9/2018 DBSERVED EXCESS CRUMBS AND FOOD PARTICLES. ALL FOOD AND DRINK STOPAGE SHALL BE MAINTAINED CLEAN TO PREVENT CROSS CONTAMINATION. OBSERVED ONE VIABLE COKROACH EGG UNDER 29 7/29/2018 HAND WASH SINK IN PMI ALL ODENINGS SHALL BE PROPERLY COVERED TO PREVENT VECTORS FROM ENTERING.

ELECTRICAL OUTLET UNDER HANDWASH SINK IN PUR IN 7/29/228 31 DISPEPAIR. CABINET IN PM 4 BATHFOOM IN DISPEPAIR. DCCUMULATION OF DUST AND CORWEBS IN PM 4 RATHROOM WINDOW. ALL EQUIPMENT SHALL BE KEPT IN GOOD REPAIR TO PREVENT POTENTIAL PHYSICAL HAZARDS. PHOTOS TAKEN A" PLACARD # 02388 REMOVED B" PLACAFOH 00942 ISSUED PIC BRIFFED ON ABOVE I have read and understand the above violation(s) and I am aware of the corrective measures to be taken. Received By (Name & Title): \*Note: When any of the following items are

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cited above, they shall be corrected within

10 days of this inspection:

(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

DEH inspector (Name)& Title):

EUNICE RPASCUAL enpuscu

J. GARCIA EPHO'I (M. C. TAFASE EPHO)